

The Drawing Center

Internship Program Application

Application Deadlines:

Fall: July 1 / Spring: November 15 / Summer: April 1 (circle session)

Date _____

Name _____

Street Address _____

City, State, and Zip Code _____

Telephone Number _____

Email Address _____

Name of Current School (if applicable) _____

Location of Current School _____

Major/Minor/Concentration _____

Level at Current School _____

Expected Degree, G.P.A., and Graduation Date _____

Name of Previous School (if applicable) _____

Location of Previous School _____

Major/Minor/Concentration _____

Awarded Degree, G.P.A., and Graduation Date _____

Relevant Course Work _____

Relevant Research Projects _____

Relevant Community and Volunteer Activities _____

Name of Current or Previous Employer _____

Location of Current or Previous Employer _____

Job Title and Duties _____

Dates Worked at Current or Previous Employer _____

Name of Previous Employer _____

Location of Previous Employer _____

Job Title and Duties _____

Dates Worked at Previous Employer _____

Office Skills _____

Computer Skills _____

Language Skills _____

Art Handling Skills _____

Other Relevant Skills _____

Please mark the internship(s) that you are interested in:

Group I Rotation

Contemporary Curation

Viewing Program for emerging artists

Education

Operations

Group II Rotation

Historical Curation

Registration

Publications

Development

Public Relations & Marketing

The Drawing Center

Please explain why you are interested in interning at The Drawing Center. Why you selected one of the two departmental grouping(s). What you hope to gain from internship and would plan to contribute to The Drawing Center. (Please use the allotted space below, do not attach a separate sheet.)

Professional Reference Name _____
Professional Reference's Relationship to You _____
Professional Reference's Telephone Number _____

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Would you be able to visit The Drawing Center for an in-person interview? _____

You would: _____ receive academic credit through your school for this internship.
_____ volunteer your time for this internship.

How many hours each week would you like to work? (15 hours each week are required)

Which days and hours are you available to work? (The Drawing Center is open Monday through Friday from 10:00 am to 6:00 pm and Saturday from 11:00 am to 6:00 pm.)

Which days and hours would you not be available to work? _____

What date would you be interested in beginning this internship? _____

What date would you be interested in ending this internship? _____

How did you learn about The Drawing Center's Internship Program? _____

Please return your completed application with your resume to:

Education Coordinator
The Drawing Center
35 Wooster Street
New York, NY 10013

Telephone: 212-219-2166, extension 119

Fax: 212-966-2976

For further information please visit: www.drawingcenter.org